

REMIT PAYMENT TO:
STAFF ZONE
P.O. Box 890722
Charlotte, NC 28289-0722
(843) 308-9663

INVOICE

Invoice Number: CH-15018923
Invoice Date: 8/28/2011
Invoice Amount: [REDACTED]
Amount Paid: [REDACTED]

TERMS: NET CASH SEVEN (7) DAYS, PAST DUE 31ST, 18% INTEREST
ANNUUM (1.5% per month) THEREAFTER.

SANDERS BROTHERS
ACCOUNTS PAYABLE
PO BOX 60969
N CHARLESTON, SC 29406

PO # [REDACTED]
Customer Number: [REDACTED]

STAFF ZONE celebrates our 10th Anniversary.

Since 2001, we have been proud to be your #1 provider of labor services. We look forward to being your first choice in all of your labor needs in the future.

↑ Please remit this stub with payment ↑

<u>Date</u>	<u>Description</u>	<u>Ticket Number</u>	<u>Regular</u>		<u>Overtime</u>		<u>Amount</u>
			<u>Hours</u>	<u>Rate</u>	<u>Hours</u>	<u>Rate</u>	
8/18/2011	BAILEY, ANDRE	1211948	9.00	\$11.70	0.00	\$0.00	\$105.30

Invoice Number: CH-15018923
Invoice Date: 8/28/2011
Invoice Amount: [REDACTED]

Total Due: [REDACTED]

THANK YOU FOR USING STAFF ZONE

STAFF ZONE

Atlanta, GA
404-762-2512

Brunswick, GA
912-264-5500

Charleston, SC
843-308-9663

Charlotte, NC
706-324-1780

Columbus, GA
706-324-1780

Dallas, TX
972-258-9663

Doraville, GA
770-220-9950

Jacksonville, FL
904-634-0052

Myrtle Beach, SC
843-626-2880

Nashville, TN
615-242-9663

Raleigh, NC
919-863-9663

Richmond, VA
804-644-9663

Savannah, GA
912-965-9120

Special Events
704-361-4072

Date: 0-22-11

Company: SANDERS BROTHERS
(Bill To) P.O. SOFIA'S LANDING

Job Site Name: SOFIA'S LANDING
& Address: GOOSE CREEK, SC

Report to: JOHN

Time: 7:00

No. of Workers Needed: 6

Job Description:

SHUAK Harbor

Repeat Work Order?

☐ Yes ☒ No

(Circle Day Needed)

Mon Tues Wed Thurs Fri Sat Sun

How Many? Time? Report to:

Authorized Signature

Print Name

Reachable Phone Number:

Remarks:

Employee Name

Mon

Tue

Wed

Thu

Fri

Sat

Sun

Total

Andre Bailey 9

SUPERVISION REQUIRED

TOTAL BILLABLE HOURS:

By signature above, customer agrees to the terms & conditions set on the reverse side of this form.

1211948

REMIT PAYMENT TO:
STAFF ZONE
P.O. Box 890722
Charlotte, NC 28289-0722
(843) 308-9663

INVOICE

Invoice Number: CH-15016232

Invoice Date: 8/8/2010

Invoice Amount: [REDACTED]

Amount Paid: _____

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE 31ST, 18% INTEREST
ANNUUM (1.5% per month) THEREAFTER.

SANDERS BROTHERS
ACCOUNTS PAYABLE
PO BOX 60969
N CHARLESTON, SC 29406

PO #:

Customer Number: [REDACTED]

**Please note our NEW remittance address and
change your records effective immediately.
Call your local servicing branch for any
questions.**

Staff Zone appreciates your business!

↑ Please remit this stub with payment ↑

<u>Date</u>	<u>Description</u>	<u>Ticket Number</u>	<u>Regular</u>		<u>Overtime</u>		<u>Amount</u>
			<u>Hours</u>	<u>Rate</u>	<u>Hours</u>	<u>Rate</u>	
8/3/2010	BAILEY, ANDRE	769537 5001700010	9.00	\$12.87	0.00	\$0.00	\$115.83

Invoice Number: CH-15016232
Invoice Date: 8/8/2010
Invoice Amount: [REDACTED]

THANK YOU FOR USING STAFF ZONE



Atlanta, GA
404-288-9737

Brunswick, GA
912-264-5500

Charleston, SC
843-308-9663

Charlotte, NC
704-714-9663

Columbus, GA
706-324-1780

Doraville, GA
770-220-9950

Jacksonville, FL
904-634-0052

Jacksonville, FL
904-636-7500

Myrtle Beach, SC
843-626-2880

Nashville, TN
615-242-9663

Richmond, VA
804-644-9663

Savannah, GA
912-965-9120

Special Events
704-361-4072

Date:

8/3/10

Company:

(Bill to)

SCANDERS BROTHERS

Job Site Name

P.O.

& Address:

2142 ASPHALT DRIVE
CUMMERVILLE, SC 29443

Report to:

PALEN

Time:

7:00 AM

No. of Workers Needed: 17

Job Description:

Repeat Work Order?

☐ Yes ☐ No

(Circle Day)

Mon Tues Wed Thurs Fri Sat Sun

How Many? Time? Report to:

Authorized Signature

Print Name

Reachable Phone Number:

Remarks:

Get 3531 old but red.
cc 50010

Employee Name	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total	Equip. Req.
Barley, Andre		9.0							HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG

SUPERVISION REQUIRED

TOTAL BILLABLE HOURS: 9

By signature above, customer agrees to the terms & conditions set on the reverse side of this form and that employees performed hours worked satisfactorily.

CUSTOMER COPY

REMIT PAYMENT TO:
STAFF ZONE
P.O. Box 890722
Charlotte, NC 28289-0722
(843) 308-9663

INVOICE

Invoice Number: CH-15016232
Invoice Date: 8/8/2010
Invoice Amount: [REDACTED]
Amount Paid: _____

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE 31ST, 18% INTEREST
ANNUUM (1.5% per month) THEREAFTER.

STAFF ZONE

SANDERS BROTHERS
ACCOUNTS PAYABLE
PO BOX 60969
N CHARLESTON, SC 29406

PO #:

Customer Number: [REDACTED]

Please note our NEW remittance address and
change your records effective immediately.
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questions.

Staff Zone appreciates your business!

<u>Date</u>	<u>Description</u>	<u>Ticket Number</u>	<u>Regular</u>		<u>Overtime</u>		<u>Amount</u>
			<u>Hours</u>	<u>Rate</u>	<u>Hours</u>	<u>Rate</u>	
8/4/2010	BAILEY, ANDRE	7695953531/50010	9.00✓	\$12.87	0.00	\$0.00	\$115.83

Invoice Number: CH-15016232
Invoice Date: 8/8/2010
Invoice Amount: [REDACTED]

THANK YOU FOR USING STAFF ZONE



Atlanta, GA
404-288-9737

Brunswick, GA
912-264-5500

Charleston, SC
843-308-9663

Charlotte, NC
704-714-9663

Columbus, GA
706-324-1780

Doraville, GA
770-220-9950

Jacksonville, FL
904-634-0052

Jacksonville, FL
904-636-7500

Myrtle Beach, SC
843-626-2880

Nashville, TN
615-242-9663

Richmond, VA
804-644-9663

Savannah, GA
912-965-9120

Special Events
704-361-4072

Date: 8/14/10

Company: SAULS BROTHERS
(Bill to) P.D.

Job Site Name: 2142 ASPHALT DRIVE
MYRTLE BEACH, SC 29483

& Address: ALLEN

Report to: SGC

Time: 5:30 AM

No. of Workers Needed: (1)

Job Description: Flagger

Repeat Work Order?

☐ Yes ☐ No

(Circle Day)

Mon Tues Wed Thurs Fri Sat Sun

How Many? _____ Time? _____ Report to: _____

Authorized Signature

Print Name

Reachable Phone Number:

Remarks:

2010 H 3531
100# 50010

Employee Name	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total	Equip. Req.
Bailey, Andre			10						HH WB SG
Only Invoiced									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG

SUPERVISION REQUIRED

TOTAL BILLABLE HOURS: 10

By signature above, customer agrees to the terms & conditions set on the reverse side of this form and that employees performed hours worked satisfactorily.

CUSTOMER COPY

MIT PAYMENT TO:
STAFF ZONE
P.O. Box 890722
Charlotte, NC 28289-0722
(843) 308-9663

INVOICE

Invoice Number: CH-15016792
Invoice Date: 10/17/2010
Invoice Amount: [REDACTED]
Amount Paid: _____

TERMS: NET CASH SEVEN (7) DAYS. PAST DUE 31ST, 18% INTEREST
ANNUUM (1.5% per month) THEREAFTER.

SANDERS BROTHERS
ACCOUNTS PAYABLE
PO BOX 60969
N CHARLESTON, SC 29406

PO #: ASPHALT DRIVE

Customer Number: [REDACTED]

**Please note our NEW remittance address and
change your records effective immediately.
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questions.**

Staff Zone appreciates your business!

<u>Date</u>	<u>Description</u>	<u>Ticket Number</u>	<u>Regular</u>		<u>Overtime</u>		<u>Amount</u>
			<u>Hours</u>	<u>Rate</u>	<u>Hours</u>	<u>Rate</u>	
10/15/2010	BAILEY, ANDRE	3429 977477 50010	11.50	\$12.87	0.00	\$0.00	\$148.01

Invoice Number: CH-15016792
Invoice Date: 10/17/2010
Invoice Amount: [REDACTED]

THANK YOU FOR USING STAFF ZONE



Atlanta, GA
404-288-9737
Brunswick, GA
912-264-5500
Charleston, SC
843-308-9663
Charlotte, NC
704-714-9663
Columbus, GA
706-324-1780
Doraville, GA
770-220-9950
Jacksonville, FL
904-634-0052
Jacksonville, FL
904-636-7500
Myrtle Beach, SC
843-626-2880
Nashville, TN
615-242-9663
Richmond, VA
804-644-9663
Savannah, GA
912-965-9120
Special Events
704-361-4072

Date:

Company:
(Bill to)

Job Site Name

& Address: P.O. REPAIR DRIVE

Report to: SUMMERVILLE, SC 29586

Time: ALLEN

No. of Workers Needed: 1

Job Description:

Plumbing

Repeat Work Order?

☐ Yes ☐ No

(Circle Day)

Mon Tues Wed Thurs Fri Sat Sun

How Many? Time? Report to:

Authorized Signature

Print Name

Reachable Phone Number:

Remarks:

Rud Bank Rd.

904-3429
cc 50010

Employee Name	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total	Equip. Req.
Blakey Jones								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG
								HH	WB SG

SUPERVISION REQUIRED

TOTAL BILLABLE HOURS:

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CUSTOMER COPY

REMIT PAYMENT TO:
STAFF ZONE
P.O. Box 890722
Charlotte, NC 28289-0722
(843) 308-9663

INVOICE

Invoice Number: CH-15016839
Invoice Date: 10/24/2010
Invoice Amount: [REDACTED]
Amount Paid: _____

TERMS: NET CASH SEVEN (7) DAYS, PAST DUE 31ST, 18% INTEREST
ANNUUM (1.5% per month) THEREAFTER.

SANDERS BROTHERS
ACCOUNTS PAYABLE
PO BOX 60969
N CHARLESTON, SC 29406

PO #: ASPHALT DRIVE

Customer Number: [REDACTED]

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questions.**

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<u>Date</u>	<u>Description</u>	<u>Ticket Number</u>	<u>Regular</u>		<u>Overtime</u>		<u>Amount</u>
			<u>Hours</u>	<u>Rate</u>	<u>Hours</u>	<u>Rate</u>	
10/19/2010	BAILEY, ANDRE	3383 789325 50010	10.00	\$12.87	0.00	\$0.00	\$128.70

Invoice Number: CH-15016839
Invoice Date: 10/24/2010
Invoice Amount: [REDACTED]

THANK YOU FOR USING STAFF ZONE



- Atlanta, GA
404-288-9737
- Brunswick, GA
912-264-5500
- Charleston, SC
843-308-9663
- Charlotte, NC
704-714-9663
- Columbus, GA
706-324-1780
- Doraville, GA
770-220-9950
- Jacksonville, FL
904-634-0052
- Jacksonville, FL
904-636-7500
- Myrtle Beach, SC
843-626-2880
- Nashville, TN
615-242-9663
- Richmond, VA
804-644-9663
- Savannah, GA
912-965-9120
- Special Events
704-361-4072

Date:

Company:

Job Site Name

Report to:

Time:

No. of Workers Needed:

Job Description:

Repeat Work Order?

☐ Yes ☐ No

(Circle Day)

Mon Tues Wed Thurs Fri Sat Sun

How Many? Time? Report to:

Authorized Signature

Print Name

Reachable Phone Number:

Remarks:

Employee Name	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total	Equip. Req.
Andie Bailey		10				10		20	HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG
									HH WB SG

SUPERVISION REQUIRED

TOTAL BILLABLE HOURS: 10

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CUSTOMER COPY